DATE ISSUED:

Application to the HISTORIC DISTRICT COMMISSION, Nantucket, Massachusetts, for a

CERTIFICATE OF APPROPRIATENESS

for structural work. All blanks must be filled in using BLUE CR BLACK INK (no pencil) or marked N/A.

NOTE: It is strongly recommended that the applicant be familiar with the HDC guidelines, *Building with Nantucket in Mind,* prior to submittal of application. Please see other side for submittal requirements. Incomplete applications will not be reviewed by the HDC. This is a contractual agreement and must be filled out in ink. An application is hereby made for issuance of a Certificate of Appropriateness under Chapter 395 of the Acts and Resolves of Mass., 1970, for proposed work as described herein and on plans, drawings and photographs accompanying this application and made a part hereof by reference. The certificate is valid for three years from date of issuance. No structure may differ from the approved application. Violation may impede issuance of Certificate of FOR OFFICE USE ONLY Occupancy. ____ Fee Paid: \$ 200 ~ PROPERTY DESCRIPTION Date application received: TAX MAP N°: 13.4.1 PARCEL N°. Must be acted on by: Street & Number of Proposed Work: __ Extended to: Approved: Disapproved: Chairman: Mailing Address: 172-178 60050 G. #13 Member: Member: E-mail: bosonlynnegamailcon Contact Phone #: Member: AGENT INFORMATION (if applicable) DIMOR Name: Notes - Comments - Restrictions - Conditions Mailing Address: -4319 E-mail: achalozecanal com **DESCRIPTION OF WORK TO BE PERFORMED** See reverse for required documentation. ☐ New Dwelling Addition ☐ Garage ☐ Driveway/Apron ☐ Commercial ☐ Historical Renovation ☐ Deck/Patio ☐ Steps ☐ Shed Gate ☐ 'ardscaping ☐ Move Building ☐ Color Change Fence Demolition Revisions to previous Cert. No. Pool (Zoning District 5R-20) Roof Size of Structure or Addition: Length: 30 Decks/Patio: Size: Sq. Footage 1st floor: _____ ☐ 1st floor ☐ 2nd floor Width: 15' Sq. footage 2nd floor: ____ Sq. footage 3rd floor: ____ Difference between existing grade and proposed finish grade: North _____ Height of ridge above final finish grade: North _____ South East West Additional Remarks REVISIONS* 1. East Elevation Historic Name: 2. South Elevation (describe) Original Date: 3. West Elevation Original Builder: 4. North Elevation Is there an HDC survey form for this building attached?

Yes N/A *Cloud on drawings and submit photographs of existing elevations. DETAIL OF WORK TO BE PERFORMED Foundation: Height Exposed _____ Block Block Parged Brick (type) ____ ☐ Piers ____ Other _____ Masonry Chimney:

Block Parged ☐ Brick (type) _ Roof Pitch: Main Mass _____ /12 Secondary Mass **Roofing material**: ☐ Asphalt: ☐ 3-Tab ☐ Architectural (Type: Red Cedar, White Cedar, Shakes, etc.) ☐ Wood Skylights (flat only): Manufacturer Rough Opening Size Rough Opening _____ Size Manufacturer ☐ Aluminum ☐ Copper ☐ Leaders (material) ____ Gutters: Wood Leaders (material and size):_ Sidewall: White cedar shingles _____ Inches Clapboard (exposure: _____ inches) Front ____ Side Other ☐ Pine ☐ Redwood ☐ Cedar ☐ Other_ Trim: A. Wood ☐ Paint ☐ Natural to weather ☐ Other B. Treatment Soffit (Overhang) _____ Corner boards ____ Frieze _____ C. Dimensions: Rake ___ Door Frame _____ Columns / Posts: Round ____ Square ___ Window Casing Windows*: ☐ Double Hung ☐ Casement ☐ All Wood ☐ Other ___ ☐ True Divided Lights(muntins), single pane ☐ SDL's (Simulated Divided Lights) Manufacturer _____ Rear___ ☐ TDL ☐ SDL Front _____ Side ____ Doors* (type and material): Material ___ Garage Door(s): Driveways____ Walkways _____ Walls Hardscape materials: * Note: Complete door and window schedules are required. **COLORS** Clapboard (if applicable) _____ Sidewall Roof ___ Doors Fence Part (WHITE) Shutters Foundation Deck * Attach manufacturer's color samples if color is not from HDC approval list. I hereby authorize the agent named above to act on my behalf to make changes in the specifications or the plans contained in this application in order to bring the applica-

tion into compliance with the HDC guidelines. I hereby agree to abide by and comply with the terms and conditions/of this application. I hereby agree that the submission of any revisions to this application will initiate a new sixty-day review period. Signature of owner of record Signed under penalties of perjury